

TREY GRAYSON KENTUCKY SECRETARY OF STATE



www.sos.ky.gov APPLICATION FOR APPOINTMENT & REAPPOINTMENT FOR NOTARY STATE AT LARGE

PURSUANT to the provisions of KRS 423.010, the undersigned applies to the Secretary of State of the Commonwealth of Kentucky to be appointed to the Office of Notary Public for the **State at Large**. For this purpose the undersigned applicant makes the following statements:

1.	Name of applicant :
	(please print or type name as it is to appear on your commission certificate)
2.	Date of birth: 3. Daytime phone number:
	(month-day-year)
4.	Home address of applicant:
	(street)
	(city) (state) (zip)
5.	If a KENTUCKY RESIDENT, county of residence or county in which applicant's principal place of employment is located:
	County. (official signature below must be from same county listed on line 5)
	If a person is NOT A RESIDENT OF KENTUCKY , but is employed in Kentucky, county in which the applicant's principal place of
	employment is located: County.
6.	Application is being made for new appointment or reappointment. If a reappointment, present commission will expire:
	Month Day (If previously a notary public and commission has expired, please check new appointment).
	Please do not send your application for reappointment earlier than four (4) weeks before your current commission is to expire).
7.	Applicant must meet following requirements: 1) eighteen (18) years of age; 2) if a Kentucky resident, a resident of the above-named county or principally employed in the county from which he or she is making application and if not a resident of Kentucky and employed in Kentucky, is principally employed in the above named county from which he or she is making application; 3) of good moral character, i.e., not a convicted felon or if a convicted felon, civil rights have been restored by executive order; and 4) capable of discharging the duties imposed upon the Office of Notary Public.
8.	Signature of applicant:
	PLEASE NOTE
	YOU MUST COMPLETE THE CERTIFICATE OF APPROVAL BY OFFICIAL BEFORE MAILING TO NOTARY COMMISSIONS
age em dut NC	e undersigned, an official authorized by statute to approve this application, states that the applicant herein is over eighteen (18) years of e, if a Kentucky resident, is a resident of or principally employed in the above-named county, or if not a Kentucky resident, but is ployed in Kentucky, is principally employed in the above named county, is of good moral character, and is capable of discharging the ies imposed by law upon the Office of Notary Public of the Commonwealth of Kentucky. DW, THEREFORE, by virtue of the foregoing statements I have made and the authority granted to me by statute, my approval to the egoing application is hereby granted.
SIC	GNATURE OF OFFICIAL:
PL	EASE PRINT OR TYPE NAME:
OF	FICIAL TITLE (INCLUDE COUNTY):

**PLEASE NOTE: The Certificate of Approval must be signed by one of the following officials: Circuit Judge, Circuit Clerk, County Judge/Executive, County Clerk, Justice of the Peace (Magistrate) or Member of the General Assembly of the county of residence of the applicant or in the county in which the applicant's principal place of employment is located.

NOTARY APPLICATION FOR NEW APPOINTMENT & REAPPOINTMENTS INSTRUCTIONS BY LINE

Line 1	List your name as it is to appear on the Certificate of Appointment
Line 2	List your date of birth
Line 3	List daytime phone number
Line 4	List your home address where your written notice of appointment will be mailed
Line 5	List County of application - If a Kentucky resident, the county of application is the county where the applicant resides OR is principally employed. For an applicant who is not a Kentucky resident, but is employed in Kentucky, the county of application is the county in which he or she is principally employed. (The county on this line should match the county of the official signature at the bottom on the certificate of approval.)
Line 6	Check new appointment or reappointment – if reappointment, list expiration date. If previously a notary public and your commission has expired, please check new appointment. Please do not send reappointments in earlier than four (4) weeks before your current notary will expire.
Line 7	Requirements for becoming a notary
Line 8	Signature of applicant as printed on Line 1

*You must complete the Certificate of Approval by an Official <u>BEFORE</u> mailing to Notary Commissions

Mail completed application along with the fee of \$10.00 (payable to the Kentucky State Treasurer) to:

Notary Commissions PO Box 821 Frankfort, KY 40602-0821

After the application has been processed by the Secretary of State, your Certificate of Appointment will be sent to the county clerk in the county of application. For a Kentucky resident, the county of application is the county where the applicant resides or is principally employed as designated in line 5. For an applicant who is not a resident of Kentucky, but is employed in Kentucky, the county of application is the county in which the non-resident is principally employed. At the same time the Secretary of State sends the Certificate of Appointment to the county clerk, a written notice will be sent to the applicant stating the Certificate of Appointment can be obtained from the county clerk's office. Within thirty (30) days of receiving your notice, you must go to the county clerk's office and

- (1) Post Bond;
- (2) Take the Oath of Office;
- (3) File and record your commission in the office of the county clerk.

For specific information regarding the bonding and oath process, you should make direct contact with your county clerk. Failure to post bond and take the oath will cause your commission to become void. This will necessitate the submission of a new application and fee to become a commissioned notary.